

REQUEST FOR PROPOSAL

Third-Party Administrator for Medical/Dental/Vision and Other Services

Solicitation # 2022-SWB-22



Proposal Due Date: May 27, 2022
Proposal Due Time: 11:00 AM CST

Sewerage and Water Board of New Orleans
Request for Proposal
Third-Party Administrator for Medical/Dental/Vision and Other Services

The Sewerage and Water Board of New Orleans (hereinafter referred to as “SWBNO”) desires to obtain a Third-Party Administrator (TPA) for its self-funded medical and dental, fully-insured vision, and basic life/AD&D and voluntary life/AD&D coverages.

Currently, medical, dental, pharmacy, and vision elections are bundled (elections for medical, dental and vision are the same)

RFP will be available **May 6, 2022** for download at the following websites:

SWBNO: https://www2.swbno.org/business_bidspecifications.asp

LAPAC: <https://wwwcfprd.doa.louisiana.gov/OSP/LaPAC/dspBid.cfm?search=department&term=181>

Proposals will be received by the Sewerage and Water Board of New Orleans Procurement Department by **May 27, 2022 at 11:00am** local time. For submission instructions, see proposal documents.

LATE PROPOSALS WILL NOT BE ACCEPTED.

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REQUEST FOR PROPOSALS

Financial Consultant

PART I. ADMINISTRATIVE INFORMATION

1.1 Request for Proposals

The Sewerage and Water Board of New Orleans (hereinafter referred to as “SWBNO”) desires to obtain a Third-Party Administrator (TPA) for its self-funded medical and dental, fully-insured vision, and basic life/AD&D and voluntary life/AD&D coverages.

Currently, medical, dental, pharmacy, and vision elections are bundled (elections for medical, dental and vision are the same)

1.2 Proposal Preparation

Proposals submitted for consideration should follow the format and order of presentation provided in Part III, Proposal Content.

1.3 Point of Contact/ Inquiries/ Requests for Information:

All correspondence and other communications regarding this RFP shall be directed to **Cashanna K Moses, Procurement Director**, Sewerage and Water Board of New Orleans, 625 St. Joseph Street, Room 133, New Orleans, Louisiana 70165, **504-585-2428**, cmoses@swbno.org.

Inquiries and/or Requests for Information are due to the Board’s Procurement Department via email to cmoses@swbno.org no later than timeline stated in the **Anticipated Proposal Timetable** . Any request received after that time may not be reviewed for inclusion in this RFP. The request shall contain the requester’s name, address, and telephone number.

The Procurement Department will issue a response to any inquiry if it deems it necessary, by written addendum to the RFP, posted on Board’s website, and issued prior to the RFP’s Delivery Deadline. The Respondents shall not rely on any representation, statement or explanation other than those made in this RFP or in any addenda issued. Where there appears to be a conflict between this RFP and any addendum issued, the last addendum issued will prevail.

1.4 Questions and Answers

Inquiries and/or Requests for Clarification are due to Cashanna K Moses, **on May 16, 2022 no later than 5:00pm CST**. Inquiries may be either in writing or via email to cmoses@swbno.org. All responses will be posted by **May 20, 2022 at 5:00pm CST**. Do not contact other SWBNO program personnel with questions regarding this RFP.

The Procurement Department will issue a response to any inquiry if it deems it necessary, by written addendum to the RFP, posted on SWBNO’s website, and issued prior to the RFP’s Delivery Deadline. The Proposers shall not rely on any representation, statement or explanation other than those made in this RFP or in any addenda issued. Where there appears to be a conflict between this RFP and any addendum issued, the last addendum issued will prevail.

1.5 Submission of Proposals

Proposers who are interested in providing services requested under this RFP can submit a proposal either courier/mail service or via email.

Ways to submit a response:

Hard Copy Submission:

- (1) Signed hardcopy of the technical proposal and (1) in a sealed envelope

Marked **2022-SWB-22- Third-Party Administrator for Medical/Dental/Vision and Other Services**

and

- (1) Digitally signed proposal on a Flash Drive in a PDF format

To:

The Sewerage & Water Board of New Orleans
Attn: Cashanna K Moses - Procurement Department
625 St. Joseph Street, Room 133
New Orleans, LA 70165

Mail or courier: Proposer remain responsible for ensuring that the proposal is delivered prior to the submission deadline with a proof of delivery. Failure to meet the submission deadline, irrespective of the mode of delivery, shall result in the rejection of the proposal.

Electronic Submission:

- (1) Digitally signed proposal in searchable PDF format to bids@swbno.org

Subject Line:

“2022-SWB-22- Third-Party Administrator for Medical/Dental/Vision and Other Services – [Proposer Name]”. If the file size of the email submission exceeds server requirements, the email submission may be broken into smaller emails with “Part 1 of #” included at the end of each original Subject Line (e.g. RFP# marked **“2022-SWB-22- Third-Party Administrator for Medical/Dental/Vision and Other Services– [Proposer Name] – Part 1 of 3”**).

Email: If the Proposer intends to submit the response by email, the date and time of the email received by the Procurement Dept. constitutes the time stamp of receipt. The date and time of the email sent by Vendor does NOT constitute a proof of receipt. The Procurement Dept. encourages Vendors to confirm that the response was received timely.

Board assumes no liability for assuring accurate/complete e-mail transmission and receipt. The responsibility solely lies with each Proposer to ensure their proposal is received at the specified email address prior to the deadline for submission. Proposals received after the deadline, corrupted files, and incomplete submissions (e.g. Part 1 and Part 2 of 3 are received, but Part 3 is not) will not be considered.

Fax submission will not be acceptable. Proposers e-mailing their proposals should allow sufficient time to ensure receipt of their proposal by the time specified.

Proposers must complete all required attachments and submit along with proposal submission. Failure to complete and submit the required documents and attachments may result in your proposal deemed non-responsive.

Proposals should clearly demonstrate the Proposer's qualifications to perform the needed services and attend all factors applicable in a professional relationship.

All proposals must be received by Board on or before the Delivery Deadline. Proposals delivered after the said deadline will not be accepted.

1.6 Changes, Addendum, or Withdrawal of Proposals

Any changes or addenda to a proposal must be submitted in writing, signed by an authorized representative of the proposer, cross-referenced clearly to the relevant proposal section, and received by SWBNO prior to the proposal due date and time. All changes and addenda must meet all requirements for the proposal. Any proposer choosing to withdraw its proposal must submit a written withdrawal request to SWBNO prior to the proposal due date and time.

The Board reserves the right to reject any and all responses to the RFP (with reasonable explanation) and/or to waive any informalities in evaluating the RFP responses if it deems this to be in the best interest of the Board, its customers, and the general public. The Board reserves the right to qualify Proposers as it deems in its best interest.

1.7 Prohibition of Communication

From the time of advertising, and until the final award, there is a prohibition on communication by Respondents (or anyone on their behalf) with Board's staff, Selection Committee members and elected officials. This does not apply to oral presentations before selection committees, contract negotiations, or communications at any time with any Board employee or elected official regarding matters not concerning this RFP. Breaking the established prohibition on communication may result in a disqualification of the proposal.

1.8 Ownership

All Responses, including any submitted documents, to this RFP or any resulting solicitation are the property of the Board for all purposes. Respondents must clearly mark individual documents or information that the applicant claims are exempt from public record disclosure and specifically justify the exemption. The Board does not guarantee the confidentiality of submissions.

1.9 Effect

This RFP and any related discussions, evaluations, qualifications, or resulting solicitations by the Board or any person on its behalf create no rights or obligations whatsoever except as provided in this RFP. The Board may cancel or modify this RFP or any resulting solicitation at any time at will, with or without notice. Anything to the contrary notwithstanding, any professional services agreement executed by the Board will be issued the exclusive statement of rights and obligations extending from this solicitation.

1.10 Errors or Omissions

The Board will not be liable for any error in any proposal. Respondent will not be allowed to alter proposal documents after the deadline for proposal submission, except under the following condition: The Board reserves the right to make corrections or clarifications due to patent errors identified in proposals by the

Board or the Respondent. The Board, at its option, has the right to require clarification or additional information from the Respondent.

1.11 Cost of Preparation

The Board is not liable for any costs incurred by prospective Respondents or Contractors prior to issuance of or entering into a Contract. Costs associated with developing the proposal, preparing for oral presentations, and any other expenses incurred by the Respondent in responding to the RFP are entirely the responsibility of the Respondent, and shall not be reimbursed in any manner by the Board.

1.12 RFP Schedule Summary

The events and dates summarized in Table 1 represent milestones in SWBNO's RFP process; however, SWBNO reserves the right to deviate from this schedule.

Table 1. Anticipated RFP Schedule Summary

Event	Date	Local Time
RFP Release	May 6, 2022	
Deadline for Request for Rules and Procedures Information	May 13, 2022	5:00pm
Deadline for SWBNO receipt of written questions from prospective proposers	May 16, 2022	5:00pm
Responses to questions/clarification	May 20, 2022	5:00pm
Proposal due date and time	May 27, 2022	11:00am
Evaluation Committee meeting, open to public	TBD	TBD
Board approval of evaluation committee	TBD	During Board Meeting, begins 9

PART II. GENERAL INFORMATION

Sewerage and Water Board of New Orleans Request for Proposals Third-Party Administrator for Medical/Dental/Vision and Other Services Effective Date - January 1, 2023

2.1 Overview of the SWBNO

The SWBNO operates and maintains infrastructure through Orleans Parish to provide safe drinking water to support fire protection and the public health of all residents, improve sewerage collection services to support public safety and sanitation, and more effectively collect and convey stormwater out of the City of New Orleans to reduce the risk from flood events. The SWBNO remains diligent in improving public safety for the citizens of New Orleans continuously at a reasonable cost to the community.

The Sewerage and Water Board of New Orleans (hereinafter referred to as “SWBNO”) desires to obtain a Third-Party Administrator (TPA) for its self-funded medical and dental, fully-insured vision, and basic life/AD&D and voluntary life/AD&D coverages.

Currently, medical, dental, pharmacy, and vision elections are bundled (elections for medical, dental and vision are the same)

SWBNO invites your company to submit a proposal to provide the following:

TPA services and administration for a Self-Funded, Bundled and Unbundled Healthcare Plan as detailed below: Provide bundled and unbundled cost for the eleven (11) categories below in a separate sealed envelope.

1. Medical Plan for Active Employees and Retirees under/over age 65. Including services for:
 - Claims Administration
 - Robust Carrier Administration System
 - HIPAA Standards and Compliance
 - COBRA Administration
 - Utilization Review / Case Management
 - Account Management / Customer Support
 - Claims Reporting / Analytics
 - PBM Integration (RxBenefits/ESI)
 - PPO Network Access
 - SPD Mirroring
 - Pre-65 Dependent Retirees Administration to collect payments
2. Dental Plan, both in network only and in and out of network options.
3. Vision Plan, both in network only and in and out of network options.
4. Employee Assistance Program.
5. 4 Tier Plan Design
 - Must represent at least the current Plan Design as described in Attachment I. Can include narrow network options (Ochsner and/or LCMC) where applicable as an alternate plan or tiered.
6. Basic Life/AD&D (Matching Current)

7. Voluntary Life/AD&D (Matching Current)

Responses will not be accepted from Brokers or Producers; **NO BROKER OR PRODUCER FEES will be accepted.**

2.2 Needed Services

See Attachment A

2.3 Contract Terms and Compensation

A contract period of one (1) year with 4 (1) year renewals and is scheduled with initiation of the contract period following approval by the SWBNO Board of Directors (Board) and issuance of Notice to Proceed.

The tentative date is scheduled for **January 1, 2023.**

2.4 Payment

The Board shall pay Proposer in accordance with the contracted prices. The Proposer will invoice the agency at the billing address designated by the agency. Payments will be made by the Agency within approximately forty-five (45) calendar days after receipt of a properly executed invoice, and approval by the Department or designee. Invoices submitted without the referenced documentation will not be approved for payment until the required information is provided.

2.5 Information

All reports, surveys, tables, charts, diagrams, product recordings and other data (including electronic, audio and video) or documentation prepared or compiled by Proposer in connection with the performance of its obligations under the contract, shall be the sole and exclusive property of the SWBNO. Proposer shall retain in its files, sufficiently detailed working papers relevant to its engagement with the SWBNO. Proposer further agrees that its working papers will be held in the strictest confidence and will not be disclosed or otherwise made available to outside sources, except as required by law, without the written consent of the SWBNO.

2.6 Insurance Requirements

Contractor shall maintain at his own expense and in good standing, such insurance as will protect the Board, the City of New Orleans, their officers, officials, employees, boards, commissions, and volunteers, and the Contractor himself, from and against any and all claims or damages to public or private property or personal injury, including death, to employees or the public, which may arise from any operations under this contract or any of its subcontracts. The coverage shall contain no special limitations on the scope of protection afforded to the Board or the City. Both the Board and the City shall appear as "Additional Insured" on all Commercial General Liability and Business Automobile Insurance. Any failure to comply with reporting provisions of the policy shall not affect coverage provided to the Board and the City, their officers, officials, employees, boards and commissions, and volunteers. The Contractor's insurance shall apply separately to each insured against whom claim is made or suit is brought, except with respect to the limits of the insurer's liability.

If this transaction requires the Contractor or subcontractor's employees to enter the Board's facilities or job sites, a senior employee of the Contractor and/or any subcontractor will review the Board's Safety Orientation Notice (Notice) and will explain this Notice to every employee who will enter Board facilities. This Notice is included as a part of the specifications for this contract.

Contractor and its insurers shall agree to waive all rights of subrogation, except on their Professional Liability Policy, against the Board, the City, and their officers, officials, employees, boards and commissions, and volunteers for losses arising from work performed by the Contractor for the Board and the City. Each insurance policy required by this contract shall be endorsed to state that coverage shall not be suspended, voided or canceled by either party, or reduced in coverage or in limits except after thirty (30) days prior written notice by certified mail, return receipt requested, that has been given to the Risk Manager of the Board. In general, insurance is to be placed with insurers with a Best's rating of at least A- V, although this requirement may be reviewed and modified by the Risk Manager of the Board in the best interest of the Board. The Risk Manager may also consider performing such review upon written request from Contractor. Contractor shall furnish the Board with certificates of insurance affecting coverage required by this contract. The certificates for each insurance policy are to be signed by a person authorized by that insurer to bind coverage on its behalf.

The certificates of insurance are to be received and approved by the Risk Manager of the Board before work commences. In the event of a claim, Contractor shall make applicable insurance policies available for review by the Board. Contractor shall retain its rights to restrict disclosure of Contractor's proprietary information.

The following are the types of insurance policies and the minimum limits of insurance coverage which shall be maintained by Contractor during the entire term of the Contract:

a) **WORKERS' COMPENSATION AND EMPLOYERS' LIABILITY**

INSURANCE, as will protect him from claims under Workers' Compensation Laws. The Workers' Compensation section of the policy shall afford statutory limits and be in accordance with all Louisiana Workers' Compensation Statutes. The Employers' Liability limit shall not be less than \$1,000,000 each accident for bodily injury by accident and \$1,000,000 each employee/policy limit for bodily injury by disease. Whenever any vessel or floating equipment is involved, the insurance shall afford coverage under the Federal Longshoremen's and Harbor Workers' Act, and shall also include protection for injuries and/or death to Masters and Members of the crews of vessels with statutory limits in accordance with the Jones Act.

b) **COMMERCIAL GENERAL LIABILITY INSURANCE**, with a limit of not less than \$1,000,000 each occurrence and \$2,000,000 general aggregate, including Explosion, Collapse, and Underground Property Damage Hazards. The Products-Completed Operations aggregate limit shall not be less than \$1,000,000 each occurrence. The general aggregate limit shall apply separately to this project.

c) **BUSINESS AUTOMOBILE INSURANCE**, which shall cover liability arising from any auto (including owned, hired, and non-owned vehicle). The limit of liability shall not be less than \$1,000,000 combined with each accident for all injuries, property damage, and/or death resulting from one occurrence.

d) **ERRORS AND OMISSIONS/PROFESSIONAL LIABILITY INSURANCE**, whichever is applicable to the particular profession or service to be provided, with limit of not less than \$1,000,000 each Claim, with a \$2,000,000 annual aggregate, without any restrictive "negligent act, negligent error, or negligent omission" clause, and sufficient to protect the Contractor, the Board, and the City, for a five (5) year period from completion of this contract,

against any and all claims which may arise from the Contractor's negligent performance of work described herein.

In addition, Contractor shall be required to furnish to the Risk Manager of the Board all copies of investigative reports with regard to any and all claims filed with the Contractor and his insurance carriers relative to the contract, with the exception of claims filed against his Workers' Compensation Insurance. Such reports shall include date, location, and description of loss as well as amounts of settlements or judgments in order that annual aggregate limits may be monitored by the Board for Contractor's compliance with these specifications.

The furnishing of insurance as provided above shall not relieve Contractor of its responsibility for losses not covered by insurance. Prior to the signing of the contract, evidence of all such applicable insurance satisfactory to the Board shall be filed with the Risk Manager of the Board. All policies shall be in insurance companies authorized to do business in Louisiana and shall remain in full force and effect until the final completion of the work and acceptance thereof by the authority of the Board. Contractor and/or his insurer shall notify the Risk Manager of the Board at least thirty (30) days in advance of any insurance coverage to be canceled or of any insurance coverage that will expire. Contractor shall simultaneously furnish the Board evidence of new coverage to be effective the same day and hour of the expired or canceled coverage. In the event Contractor fails to submit this evidence of new coverage five (5) days prior to cancellation date or expiration date of any policy or policies, the Board will obtain the required coverage to become effective on date of cancellation or expiration of said policies. The cost of such new coverage shall be at the expense of Contractor and any expenditure incurred by the Board of this coverage will be deducted from any balance due to Contractor.

2.7 Right to Audit

The Board shall have the right to audit by its personnel or its authorized representative at all reasonable times any and all records pertaining to the administration of this contract by the contractor, including its records of any subcontractor(s) employed on the contract. Such records shall be made and kept by the contractor in accordance with generally accepted accounting principles and practices. Records shall include, but are not limited to, accounting records, daily reports, correspondence and subcontract files (hard copies as well as computer readable data, if it can be made available). Records subject to audit shall also include but not be limited to those records necessary to evaluate and verify direct and indirect costs (including overhead allocations) as they may apply to cost and/or change order requests associated with this contract. The Board also reserves the right to interview employees, make photocopies, and inspect any and all records at a reasonable time for a minimum of three (3) years after completion of the project or formal acceptance of the contract by the Board. Contractors shall be required to retain such files of the project as described herein for a minimum of three (3) years after completion of the project or formal acceptance of the contract by the Board.

2.8 Confidential Information

Information contained in the Vendor's proposal that is company confidential must be clearly identified in the proposal itself as described below in the Louisiana Revised Statute 44:3.2.D.(1). SWBNO will be free to use all information in the Vendor's proposal for SWBNO's purposes. Vendor proposals shall remain confidential until SWBNO's Proposal Selection Committee makes its recommendation to SWBNO Board of Directors. The Vendor understands that any material supplied to SWBNO may be subject to public disclosure under SWBNO's confidential act.

Louisiana Revised Statute 44:3.2 D.(1) All records containing proprietary or trade secret information submitted by a developer, owner, or manufacturer to a public body pursuant to Subsection A, B, or C of

this Section shall contain a cover sheet that provides in bold type "DOCUMENT CONTAINS CONFIDENTIAL PROPRIETARY OR TRADE SECRET INFORMATION". The developer, owner, or manufacturer shall clearly mark each instance of information which is, in his opinion, proprietary or trade secret information.

2.9 Confidentiality Statement

Any information, including materials, drawings, designs, documentation, and other property or data, disclosed to the proposal responder shall not be used, reproduced, appropriated, or otherwise disseminated to anyone other than SWBNO.

PART III. PROPOSAL EVALUATION AND SELECTION

3.1 Selection Committee

Pursuant to Policy Memorandum No. 95, SWBNO must establish a Selection Committee with relevant subject-matter expertise in reviewing and evaluating proposals to the RFP. Each proposal to the RFP must be evaluated by a committee of five individuals consisting of:

- General Superintendent, or designee
- Deputy Director, or designee
- Department Head requestor, or designee
- Employee who will manage and monitor the contract
- An Expert (Employee or Non-Employee) in the field as determined by the Executive Director

The Selection Committee will first evaluate the proposals on the basis of qualitative criteria rather than quantitative price. The members on the Selection Committee will complete the numerical grading and provide a written explanation stating the reasons for the rating for each criteria.

3.2 Technical Evaluation

SWBNO will select a Proposer generally according to the procedures described in Policy Memorandum No: 95. The Selection Committee will first evaluate and score responsive RFP Responses on the criteria listed below and provide an assessment of that score. A composite scoring approach will be utilized, in which scores from each Committee member will be averaged in each category in order to score the proposals out of the possible 200 points, per Project Group and Services identified. A Proposer may receive the maximum points, a portion of this score, or no points at all, depending upon the merit of its response, as judged by the Selection Committee in accordance with the qualitative criteria below:

Technical Criteria

(30 points) Third Party Administration Capabilities

1. Seamless Claims Administration – including membership and billing, contracts, COBRA, and compliance
2. Has quality customer support capabilities
3. PPO Network Capabilities and Discounts
4. PBM Integration Capabilities with RxBenefits
5. Ability to accommodate billing and coordination with Pre-65 Retiree membership
6. Has the ability to support flexible benefit design and administration

(25 points) Implementation and Account Management

1. Implementation Process and Support
2. Annual Review Meeting Availability
3. Designated Group and Member Contacts
4. Quality Account Management Team Support
5. Communications and Engagement Capabilities

(15 points) Population Health Management

1. Utilization Review
2. Case Management
3. Maternity Management, Nurseline, Disease Management

(15 points) Reporting and Data Analytics

1. Claims Reporting & Analytics
2. Benchmarking
3. Access to reporting for SWBNO and HUB

(15 points) Online Portal

1. Administrative View: billing, eligibility, reporting, and claims review
2. Employee View: claims history, cost transparency tools
3. Ability of portal to keep member informed and engaged

TPA Selection Categories	Weighting	TPA Providers			Comments
		1	2	3	
I. Third Party Administration Capabilities					
Seamless Claims Administration - including					
1 membership and billing, contracts, COBRA, and compliance					
2 Has quality customer support capabilities					
3 PPO Network Capabilities and Discounts					
4 PBM Integration Capabilities with RxBenefits					
5 Ability to accommodate billing and coordination with Pre-65 Retiree membership					
6 Has the ability to support flexible benefit design and administration					
Individual Response Total					
Weighted Score	30				
II. Population Health Management					
1 Utilization Review					
2 Case Management					
3 Maternity Management, Nurseline, Disease Mgt					
Individual Response Total					
Weighted Score	15				
III. Reporting and Data Analytics					
1 Claims Reporting & Analytics					
2 Benchmarking					
3 Access to reporting for SWBNO and HUB					
Individual Response Total	15				
Weighted Score					
IV. Online Portal					
1 Administrative View: billing, eligibility, reporting, and claims review.					
2 Employee View: claims history, cost transparency tools					
3 Ability of portal to keep member informed and engaged					
Individual Response Total					
Weighted Score	15				
V. Implementation and Account Management					
1 Implementation Process and Support					
2 Annual Review Meeting Availability					
3 Designated Group and Member Contacts					
4 Quality Account Management Team Support					
5 Communications and Engagement Capabilities					
Individual Response Total					
Weighted Score	25				
Grand Total Weighted Score	100				

Score on scale of 1-5:

5= Exceptional

4= Exceeds Requirements

3=Meets Requirements

2=Does Not Meet Requirements

1= Unsatisfactory

3.3 Price Evaluation

Price proposals must be submitted in a separate envelope or file (if emailed) marked “Price Proposal”. A Proposer may receive the maximum points, a portion of this score, or no points at all, depending upon the merit of its Price Proposal:

(100 points) Cost is provided in a separate sealed envelope or separate file (if emailed), proposal must label what category/service and it must be in the requirements of the **Vendor’s Fee Proposal** in Attachment A.

3.4 Shortlist

SWBNO at its sole discretion may recommend a selection of Proposers for a short list based on the overall ranking by the Selection Committee.

During the review of any proposal, the Selection Committee may:

- Conduct reference checks relevant to the solicitation to verify any and all information, and rely on or consider any relevant information from such cited references or from any other sources in the evaluation of proposals;
- Seek clarification of a proposal or additional information from any or all proposers and consider same in the evaluation of proposals;
- Waive any requests or requirements if such waiver is in the best interest of the SWBNO; and
- Request interviews/presentations with any, some or all proposers to clarify any questions or considerations based on the information included in proposals, Proposals during the evaluation process, and consider any supplementary information from interviews/presentations in the evaluation

3.5 Best and Final Offer (BAFO)

Selection Committee, at its request, may ask for a Best and Final Offer from the top proposers.

Written notification is sent to the selected proposers that will include a list of the specific items to be addressed, instructions and deadline for submittal, and the evaluation criteria and scoring methodology, if different from the RFP.

If requested, when evaluating BAFO responses, if BAFO cost is requested, this will replace the original cost and the technical proposal may be re-evaluated.

PART IV. PROPOSAL SUBMISSION REQUIREMENTS

To achieve a uniform review process and obtain the maximum degree of comparability, it is required that the proposals be organized in the manner specified below.

Proposals must be prepared in English on 8 ½ x 11 inch paper with tabbed indexes separating the following sections in the following order:

4.1 Title Page

Show the RFP number and subject, the name of your firm, address, email address, telephone number(s), facsimile machine number(s), name of contact person and date.

4.2 Table of Contents

Clearly identify the materials by section, page number, and tabs.

4.3 Letter of Transmittal (Limited to One Page)

Briefly state your firm's understanding of the services to be performed and make a positive commitment to provide services as specified. Give the name(s) of the person(s) who is/are authorized to make representations for your firm, their title, address, email address, telephone number(s) and facsimile number(s).

4.4 Proposal Contents

Proposals should contain a clear and comprehensive response to all requirements/questions in the order contained herein. All responses should be identified by the corresponding section and item number. Please refer to "Attachment A" in subsections A through I as the corresponding sections that should be addressed and responded to in connection with the needed services outlined in "Attachment A".

4.5 Attachment B – Conflict of Interest Disclosure Affidavit

4.6 Attachment C – Corporate Resolution

Proposals should be prepared simply, legibly, and economically. Elaborate binders, color pictures, and promotional material are neither necessary nor desired.

Proposers not submitting the required documents and attachments may result in your response being deemed non-responsive.

Attachment A

NEEDED SERVICES

SWBNO invites your company to submit a proposal to provide the following:

1. Medical Plan for Active Employees and Retirees under/over age 65. Including services for:
 - Claims Administration
 - Robust Carrier Administration System
 - HIPAA Standards and Compliance
 - COBRA Administration
 - Utilization Review / Case Management
 - Account Management / Customer Support
 - Claims Reporting / Analytics
 - PBM Integration (RxBenefits/ESI)
 - PPO Network Access
 - SPD Mirroring
 - Pre-65 Dependent Retirees Administration to collect payments
2. Dental Plan, both in network only and in and out of network options.
3. Vision Plan, both in network only and in and out of network options.
4. Employee Assistance Program.
5. 4 Tier Plan Design
 - b. Must represent at least the current Plan Design as described in Attachment I. Can include narrow network options (Ochsner and/or LCMC) where applicable as an alternate plan or tiered.
2. Basic Life/AD&D (Matching Current)
3. Voluntary Life/AD&D (Matching Current)

Responses will not be accepted from Brokers or Producers; NO BROKER OR PRODUCER FEES will be accepted.

The effective date of coverage will be January 1, 2023.

Currently, medical, dental, pharmacy, and vision elections are bundled (elections for medical, dental and vision are the same)

The term of the initial contract will be for one (1) year, with an exclusive option by SWBNO to renew for an additional one (1) year term for up to five (5) years.

A. GENERAL SERVICES

1. Ability to complete enrollment and eligibility via electronic transfer.
2. Administer all services, including processing of claims on the effective date of the contract.
3. Manage claims by providing coordination of benefits, subrogation, Medicare coordination, and to challenge all disputed claims with providers.
4. Manage claims by offering services of utilization review, large case management, wellness, and disease management programs.
5. Provide a dedicated 1-800 customer service line specifically for employees of the SWBNO and a dedicated website for SWBNO employees.
6. Describe the process to communicate with eligible employees, retirees and dependents, regardless of state of residence.
7. SWBNO handles the enrollment process. Upon completion, SWBNO will provide a member census in Excel format. The selected vendor must be able to upload the member census or accept automatic File feeds based on a pre-determined format prior to enrollment.
8. A provider network is a critical part of the medical plan; therefore, please include access to provider directory with your proposal. Also, please provide a GEO Access and disruption report based on zip code.
 - Primary care physician – 1 per 10 miles
 - Specialists – 2 per 20 miles
10. Proposal must include the cost of printing standard coverage booklets, certificate materials, and forms.

B. PROFESSIONAL SERVICES

1. Provide a network of physicians, hospitals and ancillary medical providers. Maintain a thorough, well documented credentialing procedure, and conduct an ongoing quality assurance program under the purview of a peer review committee.
2. Provide utilization management services designed to authorize care with the fewest number of hospital days and/or elective surgeries without reducing the quality of care and patient satisfaction. Reviews to be conducted by staff consisting of registered nurses and a panel of physician advisors including specialists.
3. Provide information on all programs that target treatment of chronic diseases, (i.e., diabetes, obesity, high-blood pressure etc.). Discuss health assessment surveys, nurse interventions and health outcome data, different therapies used to treat different diseases and dissemination of data to network physicians.

C. ADMINISTRATIVE SERVICES

1. Allow plan members to enroll in the plan via file feeds, spreadsheet uploads or paper processes.
 - a. Provide administrative manuals annually. Provide updates within thirty days (30) of changes to manual.
2. Prepare and provide all plan documents:
 - a. Group Policy / Plan Document
 - b. Policy amendments
 - c. Certificates
 - d. Summary Plan Description (SPD's)
 - e. Summary of Benefits and Coverage (SBC's)
3. Furnish all standard forms to be used in connection with the administration of the plan:
 - a. Claim Forms
 - b. ID cards
 - c. Explanation of Benefits (EOB), in default paper format with the option for plan members to receive the EOB electronically.
4. Review and revise summary plan descriptions and other similar material to be distributed to plan participants by SWBNO
5. Make recommendations regarding eligibility for participation, acceptability of late entrants and extension of coverage under handicapped dependent provisions, reinstatement of participation or increase/decrease in benefits.
6. Consult on plan provisions, plan design, impact of local, state, or federal legislation, new medical procedures/technology, emerging benefits trends, cost containment, and other ongoing services issues.
7. Provide in-person training for SWBNO Benefits Administration staff as needed.
8. Ability to accommodate Retiree Administration and Billing for Pre-65 Retiree Dependents
9. Ability to mirror SWBNO's current account structure and load history from the incumbent TPA

D. ACTUARIAL AND STATISTICAL SERVICES

1. Furnish claims projections for the upcoming plan year 7 months prior to the start of the new plan year.
2. Determine the estimated Incurred but Not Reported (IBNR) claim liability semi-annually.
3. Establish retention levels of Providers and Hospitals.
4. Calculate annual summary premium rates to support 1 and 2 above.

5. Provide a breakdown of estimates, calculations or evaluations on a unit (class or location) basis as requested by the SWBNO's Benefits Department.
6. Furnish claim cost calculations for changes or proposed changes in the plans.
7. Provide an annual accounting, including appropriate case specific details, regarding claim reserves change items as appropriate and an expense detail commentary (Self-Funded plans).
8. Summary claims report as needed.

E. CLAIMS PROCESSING SERVICES

1. Furnish claim forms for out of network claims and all appeals.
2. Determine if benefits are payable.
3. Maintain a timely, accurate list of participating plan members for use in processing claims as provided by the Benefits Division.
4. Notify claimant and service provider of claims payment decisions.
5. Administer the plans' Coordination of Benefits (COB) provisions.
6. Coordinate payment of benefits with Medicare when applicable.
7. Review claims submitted for medical services that appear excessive and/or establish medical necessity for services rendered or expenses incurred.
8. Assign field claim consultants and/or professional services resources for the evaluation of complex claims.
9. Maintain peer review relations.
10. Discuss disputed charges with providers when appropriate.
11. Make reports to the IRS and furnish separate statements to providers of medical services as required by the Internal Revenue Code regarding amounts paid to such providers.
12. Maintain and store claim data elements for statistical analysis such as diagnoses codes.
13. Provide online claim viewing access to participants and plan administrator

F. OTHER

1. Consult on new products, alternate healthcare delivery systems, and healthcare cost management techniques.
2. Participate in and/or conduct employee meetings.
3. Act as a liaison with administrative, technical services, and claims departments.
4. Provide a network of physicians, hospitals and other health care professionals and providers offering discounts or special fee arrangements to their normal service fee schedules.
5. The following hospitals are facilities utilized by the SWBNO's employees and retirees and must be included in a provider network:

Tulane University Medical Center, East Jefferson General Hospital, Children's Hospital, Slidell Memorial Hospital, West Jefferson General Hospital, Touro Infirmary, Ochsner Hospital, Ochsner Baptist Hospital, Ochsner Medical Centers (all locations), New Orleans VA Medical Center, University Medical Center, LSU Medical, North Oak Medical Center LLC. LCMC (All locations)

6. An agreement to provide at least one annual health fair offering
 - a. Cholesterol, glaucoma, blood sugar and blood pressure screenings;
 - b. Displays providing information about healthcare topics like exercise, nutrition, Rx, depression, and healthy cooking;
 - c. Healthcare professionals to answer questions.
7. Internet-based technology to allow SWBNO to perform on-line additions and terminations in real time and as needed, as well as having the ability to access reports.
8. Full-time active employees and retirees under age 65 will be offered a Plan of benefits with direct access to physicians/specialists. At its discretion, the SWBNO may choose to provide a Base Plan meeting PPACA requirements and a Buy-Up Plan. Benefits schedules for the group define Direct Access as allowing access to all in-network providers without requiring contact with a Primary Care Physician (PCP) first and that no PCP needs to be chosen at the time of enrollment.

G.PLAN DESIGN – (Self-Funded bundled or unbundled) SWBNO reserves the right to score and award plans based on self-funded bundled as quoted on page 1 and unbundled design as quoted on page 1. Currently the member's election (i.e. EE/Only, EE/SP, EE/CH, EE/FAM) is bundled for medical, dental, and vision. The ancillary products with the exception of the Dental ASO services and EAP do not require cost proposal information. However, the response should overview the capability to administer these plans with the current plan designs and structure in place.

1. MEDICAL

- a. Describe your medical management programs and supply copies of reports your firm provides to demonstrate the return on investment associated with these programs.
- b. Provide a sample reporting package. Reports must be accessible to SWBNO benefit staff electronically.

- c. Describe how you will administer non-Medicare retirees.
- d. Describe how you will manage Retiree Coverage for post-65 retirees in coordination with Medicare Primary (A&B)

2. DENTAL PLAN

SWBNO's goal is to provide a network of dental professionals and providers offering discounts or special fee arrangements to their normal service fee schedules. SWBNO offers a Dental PPO plan currently as part of the self-funded program administered by The Health Plan (CIGNA Network). Active employees and their dependents will be eligible to receive dental benefits.

3. VISION PLAN

SWBNO's goal is to provide a network of vision professionals and providers offering discounts or special fee arrangements to their normal service fee schedules. SWBNO offers a Vision PPO plan currently as part of the program administered by VSP. Active employees and their dependents will be eligible to receive vision benefits.

4. LIFE/AD&D PLAN

SWBNO currently offers an Employer Paid Life & AD&D plan. Active employees working at least 30 hours a week will be eligible for the plan. The proposal should address the benefits below

- a) Flat \$25,000 Life & AD&D Benefit
- b) Medical Evidence Level: \$25,000
- c) Benefits reduce by 35% at age 65, and an additional 15% at age 70
- d) 15% Commissions

5. VOLUNTARY LIFE/AD&D PLAN

SWBNO's goal is to provide a Life & AD&D plan on a voluntary basis. Active employees and their dependents will be eligible for Voluntary Life benefits. The proposal should address the schedule of benefits listed below. The proposal should address the benefits below

- a) Employee – Increments of \$10,000 to a maximum of \$300,000 or 3x annual salary
Evidence Level: \$100,000
- b) Spouse – Increments of \$5,000 to a maximum of \$150,000; cannot exceed 50% of the EE Benefit.
Medical Evidence Level: \$25,000
- c) Child(ren) – Flat \$10,000; Medical Evidence Level: \$10,000
- d) Benefits reduce by 35% at age 65, and an additional 15% at age 70
- e) Waiver of Premium (disabled prior to age 60, waiting period 9 months)
- f) Other features include Accelerated Benefit; Conversion & Portability
- g) 15% Commissions

6. EMPLOYEE ASSISTANCE PROGRAM

SWBNO currently offers an Employee Assistance Program (EAP) which is administered by Hidalgo. Please describe your full-service Employee Assistance Program. The proposal response should address the topics below by describing your approach to these services and any additional topics that are relevant to understanding your EAP.

- a) Ability to provide plan members with five (10) face-to-face counseling sessions at no cost to employees or dependents.
- b) Ability to allow members to access employee assistance program (EAP) services and information via internet.
- c) Ability to provide telephonic translation services in Spanish and Vietnamese.
- d) Please tell us what percent of your clinicians are licensed.
- e) Describe your intervention and prevention process.

H. RULES & PROCEDURES

Upon request, the information below can be provided securely:

1. Benefits & Rate History
2. Claims Experience
3. Census
4. Current Benefits
5. Claims Payment by Month
6. Large Claim Payments
7. Membership by Month
8. Administrative Fee Summary
9. Top Physicians Report
10. Top Hospital Report
11. SWBNO EIN/TAX I.D. Number – 72-6001323

Final date to request above information is May 13, 2022 by 5:00pm (CST). Please email request to Cashanna K Moses at cmoses@swbno.org.

A summary of the rules governing proposals is as follows:

1. Multiple year contracts and cost guarantee are required.
2. Rates quoted must be firm regardless of final enrollment.

Please use footnotes if you believe supplementary comments or explanations are necessary.

1. Once finalist(s) are selected, those TPAs could be required to provide a network discount analysis on 1 year worth of claims. The file will not be distributed to all, only a select number of finalists may receive. This is a lot of work for TPA's and could include information that SWBNO does not want to share on a public website.
2. Please complete the following chart as a preliminary network discount analysis. Please use zip code 70112 and a 25-mile radius.

	Inpatient average discount %	Outpatient average discount %	Physician Average discount %
2020			
2021			
2022			
2023			

Pricing/Cost

Vendor's Fee Proposal Requirements

FEE/PREMIUM QUOTATION INFORMATION

This section summarizes the basis on which the requested plans should be quoted.

For self-funded plans, all administrative fees should be quoted on a fixed fee per-subscriber per month (PSPM) basis. Administrative, network access, and utilization management services fees must be guaranteed a minimum of for the first two (2) years of the contract. Assume **twelve monthly payments in each calendar year paid with an additional three (3) month runout period**. If the contract were to terminate, run-out claims must be paid for up to three (3) additional months by your company. Describe any additional cost to pay these run-out claims. Fees quoted on a per transaction or percent of claims basis will not be accepted.

You may provide additional information to further explain your proposal. Quoted administrative fees and insurance premiums may not change for the time period of the contract after the submission deadline. You must document any circumstances that would cause your quoted fees to change, other than enrollment, regulatory mandates, or changes in legislation.

REQUESTED PERFORMANCE STANDARDS

SWBNO may audit the Administrator's performance at the Administrator's expense. Each such audit will be performed by a qualified firm experienced in healthcare claims auditing, due eighteen (18) months after the initial effective date and every twelve (12) months hereafter. The error rates will be determined by a statistically valid claims sample of at least 200 claims. The Executive Director will select the audit firm and the results of the audit will be accepted by the Executive Director as conclusive and final. The selection of the auditor will be selected via RFP and awarded in accordance with the SWBNO's selection process.

The TPA will be required to maintain a payment and procedural accuracy ratio of 95% or greater as determined by the auditor based on an assessment of the criteria below. (This ratio will be calculated on the total number of payment and procedural errors.):

- Response Time to Members Inquiries be Telephone and Email;
- Response Time to Inquiries from SWBNO benefits staff be Telephone and Email
- Telephone Call Abandonment Rate;
- Timeliness of ID Card Distribution;
- Accuracy of ID Cards;
- Timeliness of Claims Processing;
- Excess Claims Errors;
- Subscriber Satisfaction Survey

Required Administrative Services:

Eligibility Loading – Load all eligibility information into system electronically within five (5) business days of receipt. **Measurement Criteria** – Elapsed time from date information received to the date upon which information is loaded to the eligibility system.

ID Cards – mailed within ten (10) business days after final member eligibility is received, system loaded and passes a quality assurance check. **Measurement Criteria** – Date ID cards are mailed.

Electronic “Claim Ready Date” – Electronic Claim Ready by the effective date or within twenty (20) business days after account structure is entered into the system, final member eligibility is received, and benefit plan design is finalized. **Measurement Criteria** – Date plan benefits and employee and dependent eligibility data is system loaded.

Failure to meet any of the required Administrative Services may result in your proposal being deemed non-responsive.

1. Claim Operations: Measurement Criteria – by standard claim operations reports: Provide your standard performance guarantee and penalties

- a. Time to Pay – 90% of “non-controversial” or “clean” claims paid in ten (10) business days
- b. Financial Accuracy – 99% of submitted charges processed correctly
- c. Procedural Accuracy – 95% of claims processed without non-financial error
- d. The annual penalty for failure to maintain the performance levels listed above will be:

2. Eligibility Loading	\$500,000
3. ID Cards	\$500,000
4. Electronic “Claims Ready Date”	\$500,000
5. Time to Pay	\$500,000 for failure to pay 90% of claims within 10 days; increase \$5,000 per day for a maximum of 15 days.
6. Financial Accuracy	\$500,000 for failure to process 99% of claims correctly; increase \$5,000 per 25% reduction to a maximum of \$540,000.
7. Procedural Accuracy	\$500,000 for failure to process 95% of claims without a non-financial error; increase \$5,000 maximum of \$525,000.
8. Dental/Vision	Penalties for Dental & Vision should be in Accordance with industry standards.

The Proposer may provide additional/alternative performance guarantees or fee waivers in accordance with industry standard.

This request is not a requirement and will not disqualify the proposer. The proposer will be expected to provide an adequate alternative Performance Standard Guarantee if the above cannot be met.

I. Please provide a list of additional services your company provides for self-funded plans for the SWBNO's use in selecting benefits to be covered. **(Please Note:** This request is not a requirement for the selection of the Third-Party Administrator and will not directly affect the scoring rubric or decision-making process)



Attachment B

SEWERAGE AND WATER BOARD OF NEW ORLEANS

CONFLICT OF INTEREST DISCLOSURE AFFIDAVIT

STATE OF _____

PARISH/COUNTY OF _____

Before me, the undersigned authority, came and appeared _____ who,
being first duly sworn, deposed and said that:

He/She is the _____ and authorized representative of _____
_____, hereafter called "Proposer."

The Proposer hereby confirms that a conflict(s) of interest **exists /does not exist/may exist (circle one)** in connection with this solicitation which might impair Proposer's ability to perform if awarded the contract, including any familial or business relationships that the Proposer, the proposed sub-vendors, and their principals have with the Board officials or employees. *(If a conflict(s) of interest exists and/or may exist, describe in a letter the nature of the conflict, the parties involved and why there is a conflict. Attach said letter to this form).*

Proposer Representative (Signature)

(Print or type name)

(Address)

SWORN TO AND SUBSCRIBED BEFORE ME

THIS _____ DAY OF _____ 20_____.

NOTARY PUBLIC (Signature)

NOTARY PUBLIC (Print Name)

Notary ID#/Bar Roll # _____

Attachment C

CORPORATE RESOLUTION

A meeting of the Board of Directors of _____ a corporation organized under the laws of the State of _____ and domiciled in _____ was held this _____ day _____, 20 ____ and was attended by a quorum of the members of the Board of Directors.

The following resolution was offered, duly seconded and after discussion was unanimously adopted by said quorum:

BE IT RESOLVED, that _____ is hereby authorized to submit proposals and execute agreements on behalf of this corporation with the Sewerage and Water Board of New Orleans (“SWBNO”).

BE IT FURTHER RESOLVED, that said authorization and appointment shall remain in full force and effect, unless revoked by resolution of this Board of Directors and that said revocation will not take effect until the Purchasing Director of SWBNO, shall have been furnished a copy of said resolution, duly certified.

I, _____, hereby certify that I am the Secretary of _____, a corporation created under the laws of the State of _____ domiciled in _____; that the foregoing is a true and exact copy of a resolution adopted by a quorum of the Board of Directors of said corporation at a meeting legally called and held on the _____ day of _____, 20____, as said resolution appears of record in the Official Minutes of the Board of Directors in my possession.

This _____ day of _____, 20____

SECRETARY